

12/21/01 UTILITY PATENT APPLICATION TRANSMITTAL UNDER 37 C.F.R. §1.53(b)

ASSISTANT COMMISSIONER FOR PATENTS
Box PATENT APPLICATION
Washington D.C. 20231

Case Docket No.: CI-0013

Sir:

Transmitted herewith for filing is the patent application of
INVENTOR OR APPLICATION IDENTIFIER: Wilson BURGESS, William N. DROHAN, Martin J. MACPHEE and
David M. MANN

FOR: METHOD OF STERILIZING HEART VALVES

Enclosed are:

1. [X] 58 pages of specification, claims, abstract
2. [X] 22 sheets of FORMAL drawing.
3. [] ____ pages of newly executed Declaration & Power of Attorney (copy or original).
4. [] Priority Claimed to ----- Appln. No(s). -----, whose entire disclosure is incorporated herein by reference.
5. [X] Applicant claims Small Entity Status.
6. [] Information Disclosure Statement, Form PTO-1449 and reference.
10. [X] Authorization under 37 C.F.R. §1.136(a)(3).
11. [] Request and Certification Under 35 U.S.C. 122(b)(2)(B)(i)

12. [] Other:

7. [] Assignment Papers for _____ (cover sheet, assignment & assignment fee).
8. [] Certified copy of _____
9. [X] Two (2) return postcards.
[X] Stamp & Return with Courier.
[X] Prepaid Postcard-Stamped Filing Date & Returned with Unofficial Serial Number.

10/24/04
US PTO
12/21/01

| CLAIMS AS FILED | | | | | |
|---|-----------|------|-----------|------------------|-----------|
| For | No. Filed | | No. Extra | Rate | Fee |
| Total Claims | 290 | - 20 | 270 | X \$9.00 | \$2430.00 |
| Indep. Claims | 8 | - 3 | 5 | X \$42.00 | 210.00 |
| Multiple Dependent Claims (If applicable) | | | | X \$140.00 | 140.00 |
| | | | | BASIC FEE | \$370.00 |
| | | | | TOTAL FILING FEE | \$3150.00 |

[] This is a Continuation-in-part (CIP) of prior application No: _____ filed _____. Incorporation By Reference-The entire disclosure of the prior application is considered as being part of the disclosure of the accompanying application and is hereby incorporated by reference therein.

[] Amend the specification by inserting before the first line the sentence:

--This application is a continuation-in-part of Application Serial No. _____ filed _____ .-

[] A check in the amount of \$_____ (Check #_____) is attached.
[] Please charge my Deposit Account No. 16-0607 in the amount of \$_____. A duplicate copy of this sheet is enclosed.
[] The Commissioner is hereby authorized to charge payment of the following fees associated with this communication or credit any overpayment to Deposit Account No. 16-0607. A duplicate copy is enclosed.
[] Any additional filing fees required under 37 C.F.R. 1.16.
[] The Commissioner is hereby authorized to charge payment of following fees during the pendency of this application or credit any overpayment to Deposit Account No. 16-0607. A duplicate copy of this sheet is enclosed.
[] Any patent application processing fees under 37 C.F.R. 1.17.
[] Any filing fees under 37 C.F.R. 1.16 for presentation of extra claims.

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